

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: DEBRA LANE (0010648)
Address: 1827 DEBRA LANE, GREEN BAY, WI 54302
License Status: REGULAR
Licensed/Certified/Registered 07/19/2004
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0097302 **End Date:** 06/27/2006 **Type:** STANDARD **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0095032 **End Date:** 05/20/2005 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092961 **End Date:** 07/19/2004 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Complaint History

Date Complaint Received: 03/29/2006

Date Investigation Completed: 06/27/2006

Subject Area(s)
ABUSE
MEDICATIONS

<u>Result</u>	<u>SOD #</u>
NOT SUBSTANTIATED	
NOT SUBSTANTIATED	

Date Complaint Received: 02/23/2005

Date Investigation Completed: 05/24/2005

Subject Area(s)
RESIDENT BEHAVIOR/FACILITY PRACTICE

<u>Result</u>	<u>SOD #</u>
NOT SUBSTANTIATED	

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